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To: Commissioner for Patients #Fax: 57.1-273-8300 Tai: 0ur File Ref.: PCP-0302 Total: 19 September: 2006 RE: Notice of Allowance and Fee(s) Due No. of Pages: 4 (Inc.)	275-US					
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In response to the Notice of Allowance dated 08/11/2006, please find the following checked items:						
Cover letter, 1 sheet(s);						
Submission of Formal Drawings numbered Figuresto,sh	neet(s);					
Comment to Statement on Reasons for Allowance, sheet(s);						
Change of Correspondence Address (Application), Form PTO/SB/122,	sheet(s);					
Certificate Under 37 CFR 3.73, Form PTO/SB/96, sheet(s)						
Thank you.						
Certificate of Transmission Under 37 C.F.R. 1.8 The undersigned hereby certifies that a true and eccurate copy of the items checked above are being transmitted to the Honorable Commission to the facsimile number indicated above, on this the 19th day of September 20 08. Michael I. McRoy.	per for Patants, by facelimile					

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MATTHEW M. ESLAMI, PE PATENT AGENT INTELLECTUAL PROPERTY

CINCINNATI TECHNOLOGY CENTER 6285 TRI-RIDGE BOULEVARD **LOVELAND OH 45140**

T 513,248,6193 F 513.248.6455 matthew.eslami@ipaper.com **☑** BY FACSIMILE TO (571-273-8300 SENT BY FIRST CLASS MAIL TO THE ADDRESS BELOW 19 September 2006 Mail Stop ISSUE FEE Commissioner for Patents United States Patent and Trademark Office Post Office Box 1450 Alexandria, Virginia 22313-1450 **RESPONSE TO NOTICE OF ALLOWANCE** Applicant(s) : Dennis W. Anderson Serial No. 10/681,759 Filed on 09/12/2003 Title Apparatus and Method for Conditioning a Web on a Papermaking Machine Our Ref. Dear Commissioner: Enclosed herewith for filing, Applicant(s) respectfully submit(s) the following checked items: Fee(s) Transmittal - Part B, Form PTOL-85, 2 sheet(s): Submission of Formal Drawings numbered Figures _____ to ____ Comment to Statement on Reasons for Allowance, _____ sheet(s); Change of Correspondence Address (Application), Form PTO/SB/122, _____ sheet(s); Certificate Under 37 CFR 3.73, Form PTO/SB/96, _____ sheet(s); Postage-prepaid return-receipt postcard for your use in stamping to indicate receipt of the above-listed items. Please stamp the enclosed postcard and return same to me to indicate your receipt of the abovelisted items. Please feel free to contact me if you have any questions concerning the above or the enclosed. Certification of Mailing or Transmission Under 37 C.F.R. 1.8
The undersigned hereby certifies that a true and accurate copy of the within "Response to Notice of Allowance", together with all attachments referred to herein, is being transmitted to the Honorable Commissioner for Patents, either by first-class With kindest regards,

Matthew M. Eslami Agent for Applicant(s)

Enclosure(s) MME/ mlm

mall, postage prepaid, addressed to Mail Stop ISSUE FEE, Commissioner for Pat-

ents, Post Office Box 1450, Alexandria, Virginia 22313-1450, or by facsimile transmission to the facsimile number indicated hereon, on this the 19th September , 20_06 .

Michele L McRoy

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

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P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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09/25/2006	RMEBRAH1	00000139	090525	10661759

01 FC:1501 1400.00 DA

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300.00 DA

APPLICATION NO

FILING DATE 09/12/2003

FIRST NAMED INVENTOR

Dennis W. Anderson

ATTORNEY DOCKET NO. 51753.00

06

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

CONFIRMATION NO. 8154

(Depositor's name)

(Signature

(Date

TITLE OF INVENTION: APPARATUS AND METHOD FOR CONDITIONING A WEB ON A PAPERMAKING MACHINE

L	APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/13/2006	
	EXAM	IINER	ART UNIT	CLASS-SUBCLASS]			
	HALPER	N, MARK	1731	162-263000	•			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent anomeys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3.	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) INTERNATIONAL PAPER Company MEMPHIS, TN Please check the appropriate assignce categories (will not be printed on the patent): Individual Corporation or other private group entity Government								
				b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 09-6525 (enclose an extra copy of this form).				
	a. Applicant claims	us (from status indicated SMALL ENTITY status Publication Fee (if requi kords of the United State	. See 37 CFR 1.27,	b. Applicant is no long from anyone other than the office.	er claiming SMALL ENTI	TY status, See 37 CFR	.27(e)(2).	
	Authorized Signature _ Typed or printed name	MATTHEN	M. ESLAMI		Date 9/18/6 Registration No. 4	16		
Th an sub this Bo Ald	is collection of informal application. Confidential imiting the completed is form and/or suggestion of 1450. Alexandria, Virexandria, Virginia 2231	tion is required by 37 CF ality is governed by 35 U application form to the U ms for reducing this burd- ginin 22313-1450. DO 1 5-1450.	R 1.311. The information I.S.C. 122 and 37 CFR 1 JSPTO. Time will vary on the sent to the NOT SEND FEES OR CO	n is required to obtain or ret 14. This collection is estin depending upon the individ Chief Information Officer, OMPLETED FORMS TO	tain a benefit by the public nated to take 12 minutes to lual case. Any comments U.S. Patent and Tradema THIS ADDRESS, SEND	which is to file (and by o complete, including ga on the amount of time y rk Office, U.S. Departm TO: Commissioner for P	the USPTO to process) thering, preparing, and ou require to complete ent of Commerce, P.O. atents, P.O. Box 1450,	

PTOL-85 (Rev. 07/06) Approved for use through 04/30/2007.

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